

4442

Cambridgeshire County Council

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

ADMINISTRATIVE COUNTY OF CAMBRIDGE

FOR THE YEAR 1957

Cambridgeshire County Council

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

ADMINISTRATIVE COUNTY OF CAMBRIDGE

FOR THE YEAR 1957

INDEX

	PAGE
After Care	19
Ambulance Service	23
Ante Natal and Post Natal Work	12
Birth Rate	1
Blind Persons	21
Cancer	2 & 3
Child Welfare, Maternity and Midwifery	10
Death rate from All Causes	1
Dental Treatment of Mothers and Young Children	14
Diphtheria Immunisation	5
Domestic Help Service	17
Health Visiting	11 & 13
Home Nursing	15
Infant Mortality	1
Infant Welfare Centres	11 & 13
Infectious Diseases	4
Maternal Mortality	2
Mental Health	20
Notification of Births	10 & 12
Nursing Homes, Maternity and	15
Poliomyelitis Vaccination	8
Population	1
Statistics	1
Still-Births	1
Tuberculosis	18
Vaccination	7
Venereal Diseases	19
Welfare Foods	15
Whooping Cough Immunisation	5

Table 1. Causes of Death at Different Periods.

A faint, light-colored watermark of a classical building with four columns and a triangular pediment is visible in the background.

Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29089657>

HEALTH COMMITTEE

as at December 31st, 1957

Chairman—Councillor H. R. Mallett*†

Alderman	S. T. Bull*	Councillor	D. Greaves*
„	F. Bennett*	„	H. Hartley
„	M. Carter*†	„	E. Hepher*†
„	L. M. H. Clark*†	„	F. H. Jeeps*
„	E. G. G. Frost*	„	G. M. Macfarlane-Grieve*
„	E. W. Parsons*	„	D. M. Nichols*
Councillor	A. B. Amey*	„	C. Webb
„	R. Briggs*	„	E. Whitehead*†
„	P. F. Dennard*	„	M. F. Williams

Chairman of the City M.C.W. Sub-Committee.

Vice-Chairman of the City M.C.W. Sub-Committee.

Dr. A. Brown } Nominated by the Cambridgeshire Local Medical
Dr. D. Cameron* } Committee.

Miss D. K. Bell Nominated by the Royal College of Nursing.

*Member of Mental Health Sub-Committee.

†Member of Home Help Service Sub-Committee.

The following were co-opted members of the Mental Health Sub-Committee:—

Lady Adrian, Mrs. E. Blackman, Mrs. E. Rawdon Briggs, Dr. D. Cameron, Mrs. R. Rootham.

The following constituted the City Maternity and Child Welfare Sub-Committee:—

Mr. E. L. Anderson, Mr. F. Bailey†, Mrs. G. Y. Burn, Mrs. M. E. Henn, Mr. A. Kedge (Vice-Chairman), Mr. H. R. Mallett (Chairman)*†, Dr. Lloyd Prichard, Mrs. M. V. Morse†, and Mr. R. F. Reilly.

Appointed by the County Health Committee:—

Alderman M. Carter, Councillor A. B. Amey, Councillor E. Hepher.

Co-opted members:—

Mrs. D. Greaves, Mrs. D. R. Lockyer, Dr. M. G. P. Reed.

VITAL STATISTICS AND INCIDENCE OF INFECTIOUS DISEASE

The following figures set out the facts relating to the Administrative County for the year 1957 and for the two previous years.

Population (Registrar General's Estimates):

			1955	1956	1957
Administrative County	..	..	179,800	181,100	182,200
Cambridge	..	..	91,140	91,780	91,980
Rural Districts	..	..	88,660	89,320	90,220
Chesterton	..	..	40,490	41,150	41,850
Newmarket	..	..	20,190	20,190	20,230
South Cambridgeshire	..	..	27,980	27,980	28,140

Births (live):

Administrative County	Number	..	..	2,541	2,597	2,809
	Rate per 1,000 population			14.1	14.3	15.4
Cambridge	Number	..	..	1,170	1,200	1,257
	Rate per 1,000 population			12.8	13.1	13.7
Rural Districts	Number	..	..	1,371	1,397	1,552
	Rate per 1,000 population			15.5	15.6	17.2
Chesterton	Number	..	..	622	645	739
	Rate per 1,000 population			15.4	15.7	17.7
Newmarket	Number	..	..	294	282	306
	Rate per 1,000 population			14.6	14.0	15.1
South Cambs.	Number	..	..	455	470	507
	Rate per 1,000 population			16.3	16.8	18.0

Illegitimate Births:

Administrative County	Number	..	..	107	103	109
	Rate per cent live births			4.2	4.0	3.9
Cambridge	Number	..	..	72	62	60
	Rate per cent live births			6.2	5.2	4.8
Rural Districts	Number	..	..	35	41	49
	Rate per cent live births			2.6	2.9	3.2

Still Births:

Administrative County	Number	..	..	53	47	47
	Rate per 1,000 total births			20.4	17.8	16.5
Cambridge	Number	..	..	31	18	17
	Rate per 1,000 total births			25.8	14.8	13.3
Rural Districts	Number	..	..	22	29	30
	Rate per 1,000 total births			16.5	20.3	19.0

Deaths:

Administrative County	Number	..	..	1,915	2,070	1,952
	Rate per 1,000 population			10.7	11.4	10.7
Cambridge	Number	..	..	919	1,014	960
	Rate per 1,000 population			10.1	11.0	10.4
Rural Districts	Number	..	..	996	1,056	992
	Rate per 1,000 population			11.2	11.8	11.0

Infant Deaths:

Administrative County	Number	..	..	54	53	52
	Rate per 1,000 live births			21.6	20.4	18.5
Cambridge	Number	..	..	30	30	25
	Rate per 1,000 live births			25.6	25.0	19.9
Rural Districts	Number	..	..	24	23	27
	Rate per 1,000 live births			17.5	16.5	17.4

Maternal Deaths:

Administrative	Number	..	..	..	Nil	Nil	3
County ..	Rate per 1,000 total births				Nil	Nil	1.05
Cambridge ..	Number	..	..	..	Nil	Nil	1
	Rate per 1,000 total births				Nil	Nil	0.78
Rural Districts	Number	..	..	..	Nil	Nil	2
	Rate per 1,000 total births				Nil	Nil	1.26

*Tuberculosis Deaths:**Pulmonary:*

Administrative	Number	..	..	..	15	15	4
County ..	Rate per 1,000 population				0.08	0.08	0.02
Cambridge ..	Number	..	..	..	6	3	1
	Rate per 1,000 population				0.07	0.03	0.01
Rural Districts	Number	..	..	..	9	12	3
	Rate per 1,000 population				0.10	0.13	0.03

Non-Pulmonary:

Administrative	Number	..	..	..	2	Nil	1
County ..	Rate per 1,000 population				0.01	Nil	0.005
Cambridge ..	Number	..	..	..	2	Nil	1
	Rate per 1,000 population				0.02	Nil	0.01
Rural Districts	Number	..	..	..	Nil	Nil	Nil
	Rate per 1,000 population				Nil	Nil	Nil

All Forms:

Administrative	Number	..	..	..	17	15	5
County ..	Rate per 1,000 population				0.09	0.08	0.025
Cambridge ..	Number	..	..	..	8	3	2
	Rate per 1,000 population				0.09	0.03	0.02
Rural Districts	Number	..	..	..	9	12	3
	Rate per 1,000 population				0.10	0.13	0.03

Cancer Deaths:

Administrative	Number	..	..	..	317	383	380
County ..	Rate per 1,000 population				1.8	2.1	2.1
Cambridge ..	Number	..	..	..	167	204	185
	Rate per 1,000 population				1.8	2.2	2.0
Rural Districts	Number	..	..	..	150	179	195
	Rate per 1,000 population				1.7	2.0	2.2

The estimated rise in the population between mid 1956 and mid 1957 is of a similar level to that estimated as having occurred between the same points of 1955 and 1956. Most of the latest rise was, however, in the Rural Districts and again it was Chesterton Rural District which was the chief participant. The population in Newmarket Rural District has increased at a very slow rate for several years past.

All areas of the County showed a considerable increase in the birth rate, Chesterton having the largest rise in this figure also.

The illegitimate birth rate in the Administrative County was only very slightly below that of the previous year and once more it was the City of Cambridge which was responsible. The Rural Districts recorded a rise for the second successive year but nevertheless the figure there is still of a comparatively low order.

The still birth rate again fell, on this occasion to approximately the same extent in the City and rural area. The commendably low rate of the previous year in the City was therefore more than maintained.

There was an all round fall in the general death rate in the dimensions of which there was no great difference as between the City and the rural area. If the crude death rates in the City and Rural Districts respectively are standardised by the use of the comparability factor supplied by the Registrar General, the former has a figure of 10.0 and the latter of 9.1, a difference which is somewhat greater than that of the previous year, but of the same nature.

The infant mortality rate in the Administrative County showed a further small fall but this was occasioned by a fairly large fall in the City, offset by a small increase in the rural area. There were no deaths from diarrhoea in any part of the County but there were two from pneumonia, and two from bronchitis in the City and one from pneumonia in the rural area. The total number of deaths from respiratory conditions is thus the same as that of the previous year. As in that year, the great majority of the deaths were allocated by the Registrar General to the two groups "congenital malformations" and "other defined and ill defined diseases." The former group is difficult to control and comment on the latter is impossible without more detailed information.

Of the total of 52 infant deaths, 42 took place in children of under four weeks old, a slightly higher proportion than that of the previous year. It is evidently this fraction of infant mortality to which attention must be given if further improvement in the total rate is to be achieved.

The maternal death rate for 1957 constitutes a dark spot in the otherwise reasonably bright statistical picture. After two years of complete freedom from this form of mortality there were three maternal deaths, one allocated to the City of Cambridge and two to the rural area. Of the latter, one took place in another county, the train of circumstances which led up to it taking place while the patient was on holiday. So far as the others were concerned, each occurred in the Maternity Hospital, Cambridge, and enquiry seems to show that there was no factor constituting the deaths avoidable in the sense that foreknowledge could have prevented them.

There was a striking fall in the number of deaths from pulmonary tuberculosis and in the Administrative County and each of its constituent areas the death rate reached a record low level. It is unlikely that such a level will be improved or even maintained in its entirety until the disease is virtually wiped out.

It is not possible to make quite the same statement about the death rate from non-pulmonary tuberculosis since in 1956 there were no deaths at all from this condition while in 1957 there was one, credited to the City of Cambridge. In the rural area there were no such deaths for the third year in succession. Apart from the year 1956 when there were no deaths, the rate for the City is the lowest on record.

It will be obvious from the above that the death rate from all forms of tuberculosis reached a record low level in all parts of the County.

The number of deaths from cancer in the County as a whole fell very slightly but when the two separate areas are considered it is seen that there was a greater fall in the City of Cambridge offset by a rise in the rural

area. Fourteen of the 380 deaths took place at ages below 45, nine less than in the previous year, and 150 at ages below 65, the same figure as that of the previous year. There were 58 deaths from cancer of the lung and bronchus, 18 fewer than in 1956, of which 10 occurred in women, one more than in 1956.

In view of the fact that mortality from lung cancer is now considered to be closely connected with excessive smoking, Local Health Authorities were asked to consider what could be done to bring the connection to the notice of the public. The County Health Committee considered the matter and decided that the best line of approach was through children and adolescents and the County Medical Officer was asked to arrange with the Chief Education Officer for the issue of a letter to the Head Teachers of all schools in which there were children over the age of eleven drawing their attention to the importance of the matter and giving them the facts so that they could bring them to the notice of the older children in a suitable way. This was done but the amount of interest which was taken appeared to be very small. The County Medical Officer was asked by one Head Teacher to go to one of the schools in the rural area and explain the matter to the senior boys in greater detail but otherwise the letter excited no comment.

The difficulties of educating the public by precept in a matter of this sort are very great and it would appear that no great progress is likely to be made so long as an example is not shown by responsible people and so long as there is no way of countering the advertising campaigns sponsored by the tobacco manufacturers.

The incidence of the principal infectious diseases in the year 1957 and the two previous years is shown below:—

			1955	1956	1957
Scarlet Fever ..	..	..	173	139	80
Diphtheria ..	..	..	1	—	1
Enteric Fever					
(including paratyphoid) ..	..		11	1	3
Smallpox ..	..	..	—	—	—
Cerebro-spinal Fever ..	..		1	3	6
Pneumonia ..	..	..	56	57	50

The incidence of scarlet fever has been falling slowly for a number of years and this fall seems to have been accelerated somewhat in 1957.

Once again there has been a single case of diphtheria in the City of Cambridge. Its origin was never determined and there was no spread, but it lends point to warnings voiced in previous years that the disease has not completely disappeared and that any relaxation of the drive to have children immunised might have unfortunate consequences.

The incidence of poliomyelitis in the County was of a much higher order than usual. There were 41 cases in all, 31 paralytic and 10 non-paralytic. No part of the County escaped, the distribution being City 26 (20 with paralysis and 6 without), Chesterton Rural District 8 (7 with paralysis and 1 without), Newmarket Rural District 3 (2 with paralysis and 1 without) and South Cambridgeshire Rural District 4 (2 with paralysis and 2 without).

Immunisation against Diphtheria and Whooping Cough.—Immunisation against these diseases continued to be carried out by the general medical practitioners of the area and also at infant welfare centres. There was, however, an important change in the arrangements during 1957. Up to that year, considerable use had been made of a combined antigen for simultaneous immunisation against the two diseases, but in the course of the year the Ministry of Health advised that the risk of producing poliomyelitis with paralysis in the neighbourhood of the site of injection which had previously been known to be involved in injections of all kinds was considerably greater if combined antigens were used. There therefore seemed to be no alternative but to discontinue their issue from the Health Department and to advise medical practitioners that their use might involve unfortunate consequences. The position now is that immunisation against each disease has to be carried out separately, the antigen producing protection against diphtheria being issued by the Public Health Laboratory as in times past, and that producing protection against whooping cough only being issued from the Council's Health Department.

The following figures show the work done in the infant welfare centres of the rural area:—

CENTRE	PRIMARY IMMUNISATIONS			“ BOOSTERS ”		
	Combined		Whooping	Combined		Whooping
	Diph/ Diphtheria	Wh. Cough		Diphtheria	Wh. Cough	
Balsham	1	16	—	—	—	—
Barrington	—	8	—	—	—	—
Bassingbourn	—	22	2	—	—	2
Bottisham	—	12	—	—	—	—
Bourn	—	2	—	—	—	—
Burwell	—	18	—	—	—	3
Castle Camps	—	3	—	1	—	—
Cheveley	—	7	—	—	—	—
Chippenham	—	2	—	—	—	—
Coton	—	8	—	—	—	—
Cottenham	—	—	—	—	—	—
Croydon	—	—	—	—	—	—
Dullingham	—	13	1	—	—	2
Duxford	7	26	—	—	—	6
Elsworth	—	1	—	—	—	—
Fordham	—	—	—	—	—	—
Fowlmere	2	10	—	—	—	—
Fulbourn	4	10	1	3	—	—
Gamlingay	—	—	—	—	—	—
Girton	—	15	4	3	2	—
Gt. Abington	3	16	—	5	1	—
Gt. Shelford	—	13	—	2	—	—
Gt. Wilbraham	—	7	—	—	—	—
Harston	1	16	1	1	—	—
Histon	—	—	—	—	—	—
Isleham	—	9	—	—	—	—
Linton	1	22	—	1	—	—
Longstanton	—	19	—	3	7	—
Melbourn	—	14	4	2	—	—

Sawston	—	43	—	4	8	—
Soham	—	—	—	—	—	—
Steeple Morden	—	25	—	2	3	—
Swavesey	3	9	—	14	2	—
Waterbeach	—	32	—	1	2	—
Wicken	—	—	—	—	—	—
Willingham	—	22	—	3	4	—

In the City of Cambridge separate figures for the work done in infant welfare centres do not exist and the total number of immunisations (records received) is shown hereunder:—

City of Cambridge

Age Group	Primary Immunisations			“ Boosters ”		
	Diphtheria	Combined Diph/ Wh. Cough	Whooping Cough	Diphtheria	Combined Diph/ Wh. Cough	Whooping Cough
Under 1 year	27	576	5	—	—	—
1 year	10	110	1	—	—	—
2 years	3	25	1	—	—	—
3 years	8	21	4	—	2	—
4 years	7	12	7	9	3	—
5-9 years	20	24	21	583	144	—
10-14 years	—	4	—	2	2	—
Total	75	772	39	594	151	—

A similar table is appended for the rural area in which the work carried out in the infant welfare centres is also included.

Rural Area

Age Group	Primary Immunisations			"Boosters"		
	Diphtheria	Combined Diph/ Wh. Cough	Whooping Cough	Diphtheria	Combined Diph/ Wh. Cough	Whooping Cough
Under 1 year	51	807	24	—	—	—
1 year	15	206	3	1	2	1
2 years	3	21	1	—	4	2
3 years	2	10	1	1	6	—
4 years	8	17	6	62	44	2
5-9 years	11	11	8	125	74	4
10-14 years	—	—	—	3	—	1
Total	90	1,072	43	192	130	10

Vaccination against Smallpox.—Records were received as shown hereunder for the year 1957:—

		Vaccinated	Re-vaccinated
Under 1 year ..	..	1,923	2
1 year ..	..	38	—
Aged 2-4 years ..	..	66	28
Aged 5-14 years ..	..	92	95
Over 15 years ..	..	194	896
		2,313	1,021

The total number of vaccinations rose by 539 as compared with that of the previous year. It is satisfactory to be able to record that once again the rise was greatest in the case of children under one year, though all groups improved except that of children between the ages of one and two years. The percentage of primary vaccinations of children under one year rose from 58.1 in 1956 to 68.5 in 1957, a gratifying figure although not one which should induce complacency. Re-vaccination rose by 319 and naturally it was adults who were mainly concerned in this.

Immunisation against Poliomyelitis.—It will be remembered that the bulk of the work of immunisation against poliomyelitis during the year 1956 was done before the end of June and that although it was hoped that the campaign would re-commence in November, this did not materialise, only sufficient vaccine to deal with a few individual children having arrived.

Vaccine was promised at the beginning of 1957 but in actual fact none arrived in the area until March of that year. It was used at the Auckland Road Clinic under the same arrangements as those detailed in the 1956 Report but, in addition, general practitioners were invited to participate in the campaign to the extent of dealing with children on their own lists who had been registered for whom they submitted a record card in the same way as record cards for other forms of immunisation are submitted and became entitled to a fee of 5/- for each record. Because of difficulties associated with the procuring and storing of vaccine, the response at first was very reluctant but eventually it increased rapidly and a considerable number were taking part by the end of the year.

While the work of immunising the originally registered groups was in progress, the Ministry of Health requested that children born in the years 1955 and 1956 should be registered as the next groups for which vaccine would be available. A letter was written to the parents of every child known in the County and City Health Departments to have been born in the relevant period inviting them to register and as a result, the following numbers materialised:—

Boys born in 1955	..	..	..	..	731
Girls born in 1955	..	..	..	..	671
Boys born in 1956	..	..	..	..	762
Girls born in 1956	..	..	..	..	730

The Ministry of Health also advised that the break in the summer months following the end of June which had been observed in the previous year was no longer regarded as necessary and therefore the work proceeded throughout the year subject to the availability of vaccine.

In November notification was received to the effect that Canadian and American vaccine would be imported and subjected to British safety and reliability tests after importation but individuals who had previously consented to the use of British vaccine were to be allowed to continue to exercise a preference for that form though this would probably entail considerable delay in the carrying out of the work in their case. This meant that a letter had to be written to individual applicants asking whether they would be prepared to accept Canadian or American vaccine.

Following this the extension of the facility to children born between 1943 and 1957 inclusive, to expectant mothers, to general practitioners and their families and to ambulance staff and their families was offered as a result of which at the end of the year there were waiting for vaccination, 7,794 children in the eligible age groups and 2 expectant mothers.

The arrangements for the giving of injections continued unchanged throughout the year and the following tables give details of the work done:—

Born in	1947			1948			1949			1950			1951			1952			1953			1954			Total
	M	F	M	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Completed immunisations at Local Authority Clinics . . .	268	280	254	291	262	254	277	203	173	119	99	113	93	94	75	61	2916								
Completed immunisations by general practitioners . . .	72	53	60	50	67	62	61	61	31	36	34	25	22	28	20	14	696								
Total	340	333	314	341	329	316	338	264	204	155	133	138	115	122	95	75	3612								
First injections at Local Authority Clinics	1	3	2	—	3	2	—	1	2	1	1	—	1	1	1	—	19								
First injections by general practitioners	—	—	1	1	—	—	2	—	4	—	—	—	1	—	2	—	1	12							
Total	1	4	3	—	3	4	—	5	2	1	1	1	1	3	1	1	31								

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES

The following paragraphs give the details separately for the City of Cambridge and the rural area of the County.

City of Cambridge

In 1957 five whole time midwives notified their intention to practise outside hospitals of whom four were employed by the Authority and one was in domiciliary private practice, exactly the same situation as obtained in the previous year.

The midwives employed by the Authority attended 220 confinements as midwives, 73 more than in the previous year and 114 confinements as maternity nurses under the direction of medical practitioners, 17 more than in the previous year. The midwife in private practice attended 47 confinements as a midwife and 36 as a maternity nurse, 1 less in the former category than in the previous year and 2 less in the latter.

All five midwives were qualified to administer inhalation analgesics including "Trilene" and during the year gas and air was administered in 81 cases and "Trilene" in 234. The total number of cases in which inhalation analgesics were administered, 315, is 60 more than the figure for the previous year. It is interesting to note that "Trilene" was administered in a much greater proportion of cases, the figure being 234 out of a total of 315 cases as opposed to 119 out of a total of 255 cases in 1956.

Pethidine was used as an analgesic in labour in 239 cases as against 172 in the previous year.

Midwives working outside hospitals found it necessary to summon medical aid in 59 cases, in 58 of which the practitioner concerned had already arranged to provide the patient with maternity medical services under the National Health Service Act. The corresponding figures for 1956 were 37 and 36 respectively.

The total number of births notified in the City during the year was 2,435, including 54 stillbirths, but when these numbers are adjusted by the subtraction of births to women normally resident outside Cambridge and the addition of births taking place outside Cambridge in the case of women normally resident there, the figures relating to Cambridge women are 1,270, including 18 stillbirths.

At the combined ante-natal and post-natal clinic, 80 women made 176 attendances for ante-natal examination in 1957. Seven women made a single attendance each for post-natal examination. Apart from a reduction in the total number of attendances from 242 to 183, the figures are substantially the same as in 1956.

Premature Infants.—There were 3 live births of children with a birth weight of $5\frac{1}{2}$ lb. or less taking place in their own homes during 1957. The total number of premature births in the area was 80, the remainder having taken place in hospital. One of the children born at home

weighed between 3 lb. 4 oz. and 4 lb. 6 oz. and died before attaining the age of 28 days. One weighed between 4 lb. 6 oz. and 4 lb. 15 oz. and survived more than 28 days. The other weighed between 4 lb. 15 oz. and 5 lb. 8 oz. and survived more than 28 days but was transferred to hospital at some time during the period.

In addition there were 10 premature stillbirths, none of which took place at home.

Illegitimate Infants.—There was no change in the arrangement whereby the Council makes a contribution of £150 per annum to the Cambridge Association for Social Welfare for work in the City of Cambridge.

Health Visiting.—The number of visits paid by health visitors in the City of Cambridge during the year under review was as follows:—

To children under 1 year	1st visits ..	1,202
	Total visits ..	7,830
To children aged 1-5 years	Total visits ..	8,297
To expectant mothers	1st visits ..	169
	Total visits ..	327

Apart from first visits to children under the age of one year which show a fall of 23, all the figures represent a rise over the corresponding figures for the year 1956.

Infant Welfare Centres.—Ten centres were operating during the year involving an average of 58 sessions per month. The fall in the average number of sessions from the 59 shown in the previous year is brought about by the fact that on occasion it was not felt that the number of toddlers justified a separate session and they were seen at what might be called the routine sessions. Apart from this there was no change in the method of working and 3,167 children attended. At the end of the year 873 children in attendance were still under the age of one year and 989 children made their first attendance at a centre during the year and were under the age of one year at that attendance. The total number of attendances by children of all ages was 21,808, a slight increase over the figure for 1957. The other figures all show insignificant falls.

Day Nurseries.—The single day nursery continued to operate during 1957 providing 14 places for children under the age of two years and 26 full-time and 3 part-time places for children aged two to five years. The average daily attendance during the year was 13 children under the age of two years. Twenty six children between the ages of two and five years attended full time and one such child attended part time.

Rural Area

In the rural area notification of intention to practise was received from 44 midwives or maternity nurses of whom 31, all in the employ of the Local Authority, were known to be in practice at the end of the year.

Midwives attended 503 confinements during the year, 10 less than in the previous year, acting as midwives only in 393 cases and as maternity nurses under medical direction in 110. All the confinements were attended by midwives in the employ of the Authority.

In addition to attendance at confinement, midwives attended 560 cases which had been confined in hospital and discharged before the 14th day. This figure is 17 more than the corresponding figure for 1956.

At the end of the year all 31 midwives mentioned above were qualified to administer gas and air analgesia. The number of cases in which inhalation analgesics were used was 453, 17 more than in the previous year. Thirty three were cases in which "Trilene" was used, in 11 of which a doctor was in attendance at the time of delivery.

Pethidine was used in 244 cases during the year, 27 more than in 1956.

Midwives found it necessary to summon medical aid in 123 cases, in 121 of which the practitioner concerned had arranged to provide the patient with maternity services under Part IV of the National Health Service Act. The corresponding figures for 1956 were 114 and 110 respectively.

The total number of births belonging to the rural area notified during 1957 was 1,551, including 29 stillbirths. This figure includes transferred notifications of which the bulk comprised babies born in hospitals or nursing homes in Cambridge and Newmarket.

As was stated in the Report for 1956, the arrangement whereby women engaging midwives for confinement can be examined by a medical practitioner of their own choice at the expense of the County Council has almost completely lapsed because the majority of women now engage medical practitioners under Part IV of the National Health Service Act. In fact during 1957 only two women were so examined, both ante-natally.

Premature Infants.—The total number of infants born at home in the rural area with a birth weight of $5\frac{1}{2}$ lb. or less was 12, all but one of whom survived more than 28 days. Two weighed under 3 lb. 4 oz., 2 weighed between 3 lb. 4 oz. and 4 lb. 6 oz. (one died before attaining the age of 28 days and one was transferred to hospital at some time during the same period), 3 weighed between 4 lb. 6 oz. and 4 lb. 15 oz. and 5 weighed between 4 lb. 15 oz. and 5 lb. 8 oz. Four premature infants were born in nursing homes, all surviving more than 28 days but three were transferred to hospital on or before the 28th day.

The rural area is credited with 57 premature live births which took place in hospital of which 44 survived for more than 28 days and 8 died within 24 hours.

There were 16 premature stillbirths credited to the rural area, all but one taking place in hospital.

Illegitimate Infants.—The arrangements for the care of illegitimate infants continued unchanged throughout 1957.

Health Visiting.—The following are the numbers of visits paid by health visitors to mothers and children in the rural part of the County during 1957:—

To children under 1 year ..	1st visits ..	1,402
	Total visits ..	13,957
To children aged 1-5 years ..	Total visits ..	12,268
To expectant mothers	1st visits ..	190
	Total visits ..	503

Infant Welfare Centres.—There was no change in the infant welfare centre arrangements in the rural area during the year under review, the 36 centres continuing to operate and 44 sessions per month being held. Two thousand, eight hundred and forty nine children attended of whom 847 were under the age of one year at the end of the year. One thousand, one hundred and forty seven new children who were under the age of one year at the time of their first attendance visited the centres. The total number of attendances made by children under the age of one year was 6,642 and by children over the age of one year, 6,575, the former figure showing some slight increase over the corresponding figure for 1956 and the latter a decrease.

The following figures give details of the work done at individual centres:—

		<i>New Cases under 1 year</i>	<i>Total in attendance</i>
Balsham ..	.. ..	27	81
Barrington ..	.. ..	24	29
Bassingbourn ..	.. ..	58	114
Bottisham ..	.. ..	30	71
Bourn ..	.. ..	24	68
Burwell ..	.. ..	81	143
Castle Camps ..	.. ..	9	23
Cheveley ..	.. ..	20	52
Chippenham ..	.. ..	4	26
Coton ..	.. ..	19	69
Cottenham ..	.. ..	15	61
Croydon ..	.. ..	2	11
Dullingham ..	.. ..	21	69
Duxford ..	.. ..	55	132
Elsworth ..	.. ..	10	36
Fordham ..	.. ..	23	61
Fowlmere ..	.. ..	14	51
Fulbourn ..	.. ..	39	58
Gamlingay ..	.. ..	24	57
Girton ..	.. ..	45	125
Gt. Abington ..	.. ..	23	86
Gt. Shelford ..	.. ..	89	151
Gt. Wilbraham ..	.. ..	7	18
Harston ..	.. ..	42	115
Histon ..	.. ..	42	107

Isleham ..	..	..	..	17	44
Linton ..	..	..	..	36	43
Longstanton ..	..	..	..	44	121
Melbourn ..	..	..	..	40	107
Sawston ..	..	..	..	61	255
Soham ..	..	..	..	32	64
Steeple Morden ..	..	..	..	36	111
Swavesey ..	..	..	..	49	92
Waterbeach ..	..	..	..	64	110
Wicken ..	..	..	..	5	24
Willingham ..	..	..	..	16	63

The Details which follow apply to both the City of Cambridge and the Rural Area.

Dental Treatment of Mothers and Young Children.—It will be remembered that in the Report for 1956 mention was made of the resignation of one of the full-time dental surgeons working in the rural area. It has proved impossible to secure a replacement which has meant that 1 full-time and 1 part-time dental surgeon have had to cover the rural area, a fact which is reflected in the figures below which relate to the City of Cambridge, where the work has continued on the same lines as in previous years, and the rural area.

(a) Numbers provided with dental care

	Examined	Needing treatment	Treated	Made Dentally fit
Expectant and Nursing mothers	72	68	68	68
Children under five ..	200	172	153	150

(b) Forms of dental treatment provided:

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers	4	50	—	—	80	2	20	17	30
Children under five	—	156	181	—	61	—	—	—	—

Distribution of Welfare Foods.—During the course of the year under review, certain changes in the arrangements for the distribution of welfare foods (National Dried Milk, Orange Juice, Cod Liver Oil and Vitamin A and D Tablets) took place. In April, the cost of a tin of National Dried Milk was increased from 10½d. to 2/4 bringing it into line with the increased cost of liquid milk. During the remainder of the year, sales of National Dried Milk showed a decline which is reflected in the figures given below.

In November, orange juice which had hitherto been available for expectant mothers and children under five years of age was restricted to expectant mothers and children below the age of two years. Despite this however, the total distribution over the year as a whole was markedly in excess of that for the previous year.

Distribution continued to take place centrally from the Old Post Office, rather more than half the total for the County having been issued there, from most of the infant welfare centres in the area and through voluntary distributors in the rural part of the County.

The following figures indicate the quantities of welfare foods distributed and the figures for the previous year are given for comparison:—

County as a whole including Old Post Office

		1956	1957
National Dried Milk	(tins)	54,556	40,344
Orange Juice	(bottles)	147,397	153,480
Cod Liver Oil	(bottles)	22,012	18,992
A and D Tablets	(packets)	10,521	10,109

Old Post Office

National Dried Milk	(tins)	28,358	20,970
Orange Juice	(bottles)	88,020	89,647
Cod Liver Oil	(bottles)	10,572	9,084
A and D Tablets	(packets)	7,147	6,976

REGISTRATION OF NURSING HOMES

Towards the end of 1957 one of the nursing homes in the City of Cambridge closed following the retirement of the nurse who had operated it for many years. No new nursing homes were registered. The position at the end of the year was therefore that there were three nursing homes in the City of Cambridge and one in the rural area providing between them 3 maternity beds and 25 medical and surgical beds.

HOME NURSING

Details relating to the work of the home nursing service are set out as fully as possible in the appended tables.

In the City of Cambridge, both the number of patients visited and the total number of visits showed a considerable increase over the figures for the previous year.

There was no change in the number of staff employed in the City at the end of 1957 as compared with the number employed at the end of

1956 but it must once again be pointed out that the position fluctuates during the year and that comparison of two fixed dates does not necessarily indicate the precise position. It is a fact that even in the City it has been difficult to maintain the service at full strength, a position which is of even greater difficulty in the rural area.

So far as December 31st in each year was concerned, the number of nursing staff in the rural area had increased from 30 to 32 but in spite of this the year was one of increasing difficulty and it was only by subterfuges of various kinds that anything like an adequate service could be maintained. It was perhaps fortunate that the number of patients requiring services in that part of the County fell and the total number of visits was correspondingly lower.

City

(1)	Medical (2)	Surgical (3)	Infectious Diseases (4)	Tuberculosis (5)	Maternal Complications (6)	Others (7)	Totals (8)	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
Number of cases attended by Home Nurses during the year	1293	365	—	13	13	—	1684	1010	36	302
Number of visits paid by Home Nurses during the year	29678	7133	—	543	121	—	37475	25544	651	20429

Rural Area

(1)	Medical (2)	Surgical (3)	Infectious Diseases (4)	Tuberculosis (5)	Maternal Complications (6)	Others (7)	Totals (8)	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
Number of cases attended by Home Nurses during the year	1398	688	13	18	71	530	2718	876	136	429
Number of visits paid by Home Nurses during the year	33960	10616	22	1702	634	1378	48312	30030	853	32650

As in former years, the nurses of both the City and the rural area continued to give such assistance as was necessary with the nursing of patients discharged from Addenbrooke's Hospital under the Home Care and Nursing Service scheme. There was some check in the decline in the numbers involved in this service during 1957, there being 156 discharges under its provisions as against 144 in the previous year. Once again the great majority of the discharges involved patients living in Cambridge and the rural part of Cambridgeshire and the bulk of the cases discharged were from the surgical wards. In the whole of the area covered by the scheme, 80 cases of appendicitis and 69 cases of hernia were discharged together with a number of others which had been subject to less serious forms of surgical interference.

It will be clear from the figures that as usual the scheme added very little to the burden of work imposed on the nurses of the City and the rural area.

THE DOMESTIC HELP SERVICE

On the 1st January 1957, Miss O. B. Greenslade took over the duties of Home Help Organiser following the resignation of Mrs. Paine to whom she had acted as deputy for a number of years. A new Assistant Home Help Organiser was appointed and the clerical staff was increased to two people working full time as opposed to one working full time and one part time. This latter became necessary in view of the increase in the volume of the work which had been noted for some time.

The service continued to operate on the same lines as in 1956 and there were no changes in the rate of contribution, the maximum remaining at 3/2 per hour. Again help was supplied without charge to households where a case of tuberculosis was the cause of the need and it remains true that no difficulties arise as a result of the imposition of a minimum charge of 5/- in other cases.

At the end of the year there were 36 whole-time domestic helps, an increase of 4 over the figure for the end of the previous year and 179 part-time helps as against 181. Very slight fluctuations take place in these figures throughout the year but in the main the number of helps available remains fairly constant.

The following figures set out the numbers and types of cases in which home help was provided and the figures for the previous year are given for comparison:—

	1957	1956
Maternity (including expectant mothers)	369	280
Tuberculosis	31	40
Chronic sick including aged and infirm	350	540
Others	635	422

In 9 of the maternity cases help had commenced in 1956 and was continued in 1957 and the same thing applies in 24 of the tuberculosis cases, 221 of the chronic sick cases and 293 of the other cases.

It will be noted that there has been a sharp fall in the number of cases of chronic sick assisted but this has been offset by a marked increase in the number of maternity and other cases where help has been afforded.

The number of hours worked in 1956 was 212,221 and in 1957, 223,672.

TUBERCULOSIS

The following figures relate to new cases of tuberculosis coming to the notice of Medical Officers of Health by formal notification or otherwise but not including transfers from other areas during 1957:—

Age Periods	Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.
0	—	—	—	—
1	—	1	—	—
2	2	1	1	—
5	3	1	—	—
10	2	—	—	1
15	—	5	—	—
20	1	1	—	—
25	4	4	—	1
35	5	4	1	—
45	3	1	—	—
55	—	1	—	—
65	—	—	—	—
75 and upwards	—	—	—	1
	20	19	2	3

In two of these cases, information was derived from sources other than formal notification, namely one from death returns of local registrars and one from death returns of the Registrar General (a transferable death).

All the figures show a considerable fall from those for the previous year. The number of pulmonary cases has fallen from 73 to 39 and the number of non-pulmonary cases from 21 to 5. The total number of cases coming to light was 44 as against 94.

In addition to the numbers so far set out, however, cases were added to the notification registers as a result of transfers to Cambridgeshire from other areas. When these cases are taken into account, it is found that the number of pulmonary male cases placed on notification registers in 1957 was 43 as against 95 in 1956. The number of pulmonary female cases was 37 as against 60 in the previous year making the total of pulmonary cases 80 as against 155 in 1956. Two non-pulmonary male cases and one non-pulmonary female case were transferred to the area making a total of 8 non-pulmonary cases (4 male, 4 female) to be taken into consideration as against a total of 22 non-pulmonary cases in 1956.

The total number of ascertained cases of tuberculosis was therefore 88 or 99 less than the figure for the previous year.

No new cases commenced courses of rehabilitation at Papworth during the year, the second year in succession in which this has been the state of affairs, and the total since the arrangement started remained at 39.

The Chest Physician and his staff vaccinated 1,164 persons with B.C.G. under the Council's scheme approved by the Minister of Health in accordance with the terms of Section 28 of the National Health Service Act of 1946, a very considerable increase over the figure of 110 recorded in the previous year's Report.

The number of visits paid by health visitors to tuberculous households in the City of Cambridge was 707 of which 154 had to be regarded as fruitless and the corresponding number in the rural area was 937 of which 84 were fruitless visits, a total of 1,644 of which 238 were fruitless, as against a total of 2,023 (300 fruitless) in 1956.

Assistance continued to be given by the After Care Committee, mainly in the form of milk and groceries. Forty three patients benefited, 24 men and 19 women. Of these 32 returned to work and 11 remained under treatment at home at the end of the year. These figures are very similar to those of the previous year.

As will be seen earlier in the Report, the Council was able to assist through its Domestic Help Service 31 families where a case of tuberculosis was the cause of the need.

VENEREAL DISEASES

The following figures as to attendances at the clinic at Addenbrooke's Hospital have been supplied by the Physician in Charge:—

		Male	Female	Total
Patients under treatment on January 1st, 1957	.. .. .. ..	184	128	312
Old cases re-admitted	.. ..	22	9	31
"First time" patients during 1957	..	259	91	350
Total investigated or treated (including transfers from other clinics)	.. ..	491	235	726
Left without completing treatment	..	—	1	1
Transferred elsewhere	.. ..	1	3	4
Out patient attendances	.. .. ..	859	490	1,349

There was an increase in the number of new patients affecting both sexes and this is no doubt responsible for the increase in the total number of attendances despite the fall in the total number of individuals investigated or treated.

There were 14 cases of syphilis in Cambridgeshire patients, 4 more than in the previous year and it has unfortunately to be recorded that there were 2 cases of primary syphilis (1 male, 1 female) and 1 case of secondary syphilis (female) from all the areas served by the Clinic.

There were 32 new cases of gonorrhoea in Cambridgeshire patients as against 23 in the previous year. Out of 50 cases of gonorrhoea in the whole of the area served by the Clinic, 15 were in women.

There were six new cases of congenital syphilis in 1957 as compared with three in 1956, one in a boy under the age of 1 year, one in a girl aged between 1 and 5 years, one in a girl aged between 5 and 15 years, one in a boy over the age of 15 years and two in girls aged over 15 years.

Thirty five contacts attended for examination during the year, 9 more than in 1956, all referred by patients themselves.

MENTAL HEALTH

There was no change in the arrangements for dealing with individuals of unsound mind which were described in detail in the Report for the year 1956.

The following figures set out details of the work of the Duly Authorised Officer and his Deputy:—

Cases certified	.. .. ..	.. ..	50
Urgency Orders	.. ..	.. ..	—
Admitted under Section 20	.. ..	.. ..	9
Admitted under Section 21 (1)	.. ..	.. ..	140
Voluntary patients	.. ..	.. ..	235
Temporary patients	.. ..	.. ..	—
Other cases	.. .. ..	.. ..	39

Once again there was a considerable increase in the number of cases admitted under Section 21(1) but there was a slight decrease in the number of voluntary patients. The number of certified cases and cases admitted under Section 20 also fell somewhat but there was a rise of 50% in the number of cases concerning which no action was taken.

The two workers appointed by the Cambridgeshire Mental Welfare Association on the Council's behalf dealt with 260 cases of mental instability during the year of which 95 were new cases and 165 remained on the register from previous years.

In 1957, 32 new cases of mental deficiency were considered by the Mental Health Sub-Committee of which 18 were notified by the County Education Committee, 11 by the City Committee for Education and 3 by other Local Authorities.

The method of dealing with them was:—

Petition for Certified Institution	6
Statutory Supervision	26
Voluntary Supervision	1

Of the six cases in which the presentation of a petition was recommended, three were actually admitted to Certified Institutions during the year.

The number of cases still awaiting admission at the end of 1957 was 37, or 1 more than at the end of 1956 of which 3 were in Linton Hospital and 1 in the Mental Hospital at Fulbourn. From these figures it might be thought that the waiting list has achieved its maximum dimensions but the occurrence of institutional vacancies is very sporadic and it is impossible to say that they will balance the names which are constantly being added to the list.

At the end of the year there were 8 cases on licence from institutions.

The number of cases under Guardianship was 8 of whom only 2 had Guardians in Cambridgeshire. Of the remaining 6, the Brighton Guardianship Society has placed 3, 1 was in a home in Surrey and the other 2 were with private Guardians in Oxfordshire and Essex respectively.

There were 62 cases on the roll at the Occupation Centre at the end of the year. The Council decided not to organise a summer camp in 1957 but instead the Cambridge Society for Mentally Handicapped Children made arrangements for the holding of a camp at Kessingland at which most of the members of the staff of the Occupation Centre attended. This involved the closing of the Occupation Centre for a week in the summer term.

BLIND WELFARE

There were no staff changes during the year and the arrangement whereby the Home Teachers of the Blind dealt with other forms of disablement were continued.

As in 1956 Miss Peel and Miss Williams covered the rural part of the County and some outlying parts of the City using cars and Miss Mundahl covered the remainder of the City using a bicycle.

When the British Red Cross Society relinquished the work of dealing with disabled persons other than blind, a register containing 1,325 names was passed to the County Council. By the end of the year 1,132 visits had been paid as a result of which it was considered that 129 people

required assistance either in the form of instruction or the provision of materials. Of the remainder, 196 people had left the area or died (82 and 114 respectively). Over a period of a year 326 people had been supplied with materials for use in the work of diversional therapy and 244 lessons had been given as follows:—

Rug making	71	Embroidery	53
Cane work	25	Leather work	20
Weaving	48	Soft toy making	9
Knitting	6	Raffia	8
Seagrass	2	Artificial flowers	1
String bags	1		

There was a decrease in the number of registered blind persons during 1957, the number at the end of the year being 381 as against 386 at the end of 1956. The following table shows the distribution as to area and age groups:—

	0-5	5-16	Over 16	Total
City	1	4	204	209
Rural Area	—	3	169	172
	1	7	373	381

Of the 381 cases of blindness over the age of sixteen, 325 were regarded as unemployable. There were 3 home workers and 38 were employed elsewhere in open employment as well as 1 employed in a workshop for the blind. Four more were regarded as trainable and 1 was trained but unemployed. One girl over the age of sixteen was in attendance at a special school.

The Home Teachers paid 4,497 visits to blind persons during the year (City 1,202; rural area 3,295).

The Annual Party for blind persons was held on September 5th, 1957. It will be remembered that it had been decided to hold it in the Spring rather than round about Christmas time because of the difficulties caused by bad weather in the latter season but in 1957 petrol rationing was in force in the Spring months and therefore a further change had to be made involving the date given above. Owing to the difficulty of obtaining accommodation in a school, the period must fall in school holidays and the date chosen seemed to be the most suitable from every point of view.

Two outings were again held in July for blind persons from the City and the rural area respectively. The venue on this occasion was Hunstanton and approximately 200 people made the journey.

The following table shows the number of cases newly certified on Form B.D.8 during 1957 together with the action taken with regard to them:—

Number of cases registered during the year in respect of which Form B.D.8 recommends:	Cause of disability			
	Cataract	Glaucoma	Retrorenal Fibroplasia	Others
(a) No treatment	4	6	—	12
(b) Treatment (medical, surgical or optical)	4	1	—	7
Number of cases at (b) above which on follow up action have received treatment	—	1	—	7

Once again there were no cases of retrorenal fibroplasia in premature infants.

Of the 7 cases of glaucoma, only 1 was considered suitable for treatment and in that particular case, treatment was received.

Four of the 8 cases of cataract were recommended for treatment but none were willing to receive it.

No cases of ophthalmia neonatorum were notified during the year under the Public Health (Ophthalmia Neonatorum) Regulations 1926-1937.

AMBULANCE SERVICE

The following figures give details of the work of the ambulance service in 1957 :—

Ambulances directly provided	..	..	..	7
Cars directly provided	..	..	..	6
Number of journeys by above				
Ambulances	..	..	..	8,149
Cars	..	..	..	4,770
Patients carried by above	..	..	..
Ambulances	..	..	..	8,768
Cars	..	..	..	7,668
Accident and emergency journeys included in above				
Ambulances	..	..	..	962
Cars	..	..	..	179

Mileage run by above						
Ambulances	..	..	..	..	..	113,431
Cars ..	..	..	..	..	..	104,114
Journeys by supplementary vehicles						
Ambulances	..	..	..	..	..	327
Cars ..	..	..	..	..	..	15,271
Patients carried by supplementary vehicles						
Ambulances	..	..	..	..	..	354
Cars ..	..	..	..	..	..	21,739
Accident and emergency journeys by supplementary vehicles						
Ambulances	..	..	..	..	..	9
Cars ..	..	..	..	..	..	Nil
Mileage run by supplementary vehicles						
Ambulances	..	..	..	..	..	7,194
Cars ..	..	..	..	..	..	218,228

The number of full time staff on December 31st, 1957 was 24.

TABLE 1.—Causes of Death at Different Periods of Life in the Administrative County of Cambridge, 1957.

				AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS																													
				All		Sex		Ages 0—		1—		5—		15—		25—		45—		65—		75—		All		Sex		Ages 0—		1—		5—		15—		25—		45—		65—		75—	
				M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F												
ALL CAUSES	..	..	..	M	460	14	3	1	4	21	122	120	175	549	21	2	1	9	23	125	147	221																		
1	Tuberculosis, respiratory	..	..	M	1	—	—	—	—	—	1	—	—	3	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—								
2	Tuberculosis, other	..	..	M	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—								
3	Syphilitic disease	..	..	M	1	—	—	—	—	—	—	—	1	—	3	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—	—	—	—								
4	Diphtheria	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—								
5	Whooping Cough	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—								
6	Meningococcal infections	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—								
7	Acute poliomyelitis	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—								
8	Measles	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—								
9	Other infective and parasitic diseases	..	..	M	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—								
10	Malignant neoplasm, stomach	..	..	M	14	—	—	—	—	—	1	1	5	7	19	—	—	—	—	—	—	—	11	4	4	4	—	—	—	—	—	—	—								
11	Malignant neoplasm, lung, bronchus	..	..	M	19	—	—	—	—	—	1	2	—	2	5	—	—	—	—	—	—	—	22	5	2	2	—	—	—	—	—	—	—								
12	Malignant neoplasm, breast	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	7	6	7	—	—	—	—	—	—	—								
13	Malignant neoplasm, uterus	..	..	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—								
14	Other malignant and lymphatic neoplasms	M	49	—	—	—	—	—	1	11	14	23	60	—	—	—	—	—	—	—	15	25	20	—	—	—	—	—	—	—	—	—									
15	Leukaemia, aleukaemia	..	..	M	2	—	—	—	—	—	2	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—								
16	Diabetes	M	1	—	—	—	—	—	—	—	—	—	—	1	3	—	—	—	—	—	—	1	3	3	2	—	—	—	—	—	—	—									
17	Vascular lesions of nervous system	M	77	—	—	—	—	—	1	15	15	46	56	—	—	—	—	—	—	—	14	14	28	—	—	—	—	—	—	—	—	—									
18	Coronary disease, angina	M	85	—	—	—	—	—	1	37	26	21	98	—	—	—	—	—	—	—	1	11	21	36	—	—	—	—	—	—	—	—	—								
19	Hypertension with heart disease	..	..	M	8	—	—	—	—	—	2	2	2	2	6	—	—	—	—	—	—	—	4	2	—	—	—	—	—	—	—	—	—								
20	Other heart disease	M	44	—	—	—	—	—	2	9	12	21	88	—	—	—	—	—	—	—	2	6	13	67	—	—	—	—	—	—	—	—	—								
21	Other circulatory disease	M	11	—	—	—	—	—	1	1	4	5	15	—	—	—	—	—	—	—	1	1	4	9	—	—	—	—	—	—	—	—									
22	Influenza	M	7	—	—	—	—	—	—	2	—	2	5	8	—	—	—	—	—	—	1	3	4	4	—	—	—	—	—	—	—	—									
23	Pneumonia	M	18	1	1	—	—	—	4	6	6	21	1	—	—	—	—	—	—	2	7	11	11	—	—	—	—	—	—	—	—	—									
24	Bronchitis	M	27	1	—	—	—	—	6	6	14	32	—	—	—	—	—	—	—	5	10	17	9	—	—	—	—	—	—	—	—	—									
25	Other diseases of respiratory system	..	..	M	8	—	—	—	—	—	1	3	3	1	4	—	—	—	—	—	—	1	—	2	1	—	—	—	—	—	—	—	—								
26	Ulcer of stomach and duodenum	M	10	—	—	—	—	—	2	2	2	4	5	—	—	—	—	—	—	—	1	3	1	1	—	—	—	—	—	—	—	—									
27	Gastritis, enteritis and diarrhoea	M	1	—	—	—	—	—	1	—	—	—	1	3	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—									
28	Nephritis and nephrosis	M	4	—	—	—	—	—	2	1	1	—	1	—	—	—	—	—	—	1	—	1	3	4	—	—	—	—	—	—	—	—									
29	Hyperplasia of prostate	M	11	—	—	—	—	—	—	3	3	5	7	—	—	—	—	—	—	—	2	—	2	5	—	—	—	—	—	—	—	—									
30	Pregnancy, childbirth, abortion	M	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—									
31	Congenital malformations	M	4	2	1	—	—	—	—	—	1	—	7	4	—	—	1	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—									
32	Other defined and ill defined diseases	M	32	10	—	—	—	—	2	1	6	6	7	46	15	1	—	2	3	5	8	12	—	—	—	—	—	—	—	—	—	—	—								
33	Motor vehicle accidents	..	..	M	4	—	—	—	—	—	1	1	4	11	13	45	5	—	—	—	2</																				

